Best Available Copy

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 1005											387	6	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			33				ſ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEI	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			33 minus 20=		• 13			X\$ 9=		OR	X\$18=	234	
INDEPENDENT CLAIMS			3 minus 3 =		. 0			X42=		OR	X84=		
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT				140		1				
* If the difference in column 1 is less than zero, enter "0" in column 2								+140=	ļ	OR	+280=	000	
9	n-29	-01	-3)/\(\f\)	SAM	1-1	TOTAL		OR	TOTAL	9.19		
CLAIMS AS AMENDED - PART II							c '	SMALL	ENTITY	OR	OTHER SMALL		
	(Column 1) (CLAIMS				Column 2) (Column 3)			JIIIALL	ADDI-	1	SHALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.33	Minus	**	33	= /		X\$ 9=		OR	X\$18=		
	Independent	. 13	Minus	*** <	3			X42=		OR	X84=		
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENI	CLAIM			+140=		OR	+280=		
							L	TOTAL			TOTAL		
(Column 1) (Column 2) (Column 3)								DOIT, FEE		On,	ADDIT. FEE		
		(Column 1) CLAIMS		HIGH		(Calumn 3) -	l r	- Constant	4001	1			
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		a		X\$ 9=		OR	X \$18=		
	Independent	•	Minus	***		=		X:2=		OR	X84=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDENT	CLAIM	ner II	-	*150±			+280=		
							<u>.</u>	177AL		ОН	TOTAL		
							Αľ	DOIT. FEE		OR	ADDIT. FEE		
_		(Column 1)		(Colum		(Column 3)	}						
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID	BER	PRESENT		R E	AD DI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		±.		X2 °=		OR	X\$18=		
	Independent		Minus	RAS		=	-	X.8=			X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2									C. C	OR	TOTAL ADDIT. FEE		
The "Highest Number Previously Paid For" (Total or Independent) is the second of the appropriate box in column 1.													
ORM PTO-875 (Rev. 971)												COMMEDIC	